

| CLAIMS ONLY | | | | | | | Application Number <div style="font-size: 1.5em; font-family: cursive;">10/070282</div> | | Filing Date | | |
|-------------|----------|--------|-----------------------|--------|------------------------|--------|--|--------|-------------|--------|--|
| | | | | | | | Applicant(s) | | | | |
| | | | | | | | * May be used for additional claims or amendments | | | | |
| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | | | | | |
| | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend | |
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Application Number 10090282

Filing Date

Applicant(s)

* May be used for additional claims or amendments

| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | |
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| Total Indep | 5 | | | | | |
| Total Depend | 26 | | | | | |
| Total Claims | 31 | | | | | |

| | Indep | Depend | Indep | Depend | Indep | Depend |
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